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KOWA.001A

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant	:	Daniel L. Kowalewski)	Group Art Unit 8433
Appl. No.	:	10/004,094)	
Filed	:	October 23, 2001)	
For	:	ROTATING DISPLAY SYSTEM)	
Examiner	:	Wu, Xiao Min)	

AMENDMENT/REPLY TO FIRST OFFICE ACTION

Honorable Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22213-1450

Dear Sir:

This responds to the office action dated 03/25/2004. Please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims, which begins on page 2 of this paper.

Remarks begin on page 7 of this paper.

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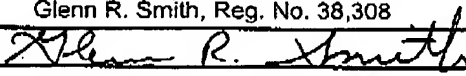
PTO/SB/21 (04-04)

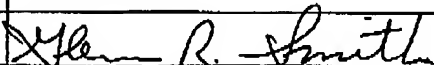
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/004,094	
	Filing Date	10/23/2001	
	First Named Inventor	Daniel L. Kowalewski	
	Art Unit	8433	
	Examiner Name	Wu, Xiao Min	
Total Number of Pages in This Submission	8	Attorney Docket Number	KOWA.001A

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	See "Remarks" for complete itemization of this submission
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	- Transmittal Form in 1 page - Amendment/Reply to First Office Action in 7 pages	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	LAW OFFICE OF GLENN R. SMITH Glenn R. Smith, Reg. No. 38,308
Signature	
Date	June 25, 2004

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name		Fax #: (703) 872-9306	
Glenn R. Smith			
Signature		Date	June 25, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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